

P06000023273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

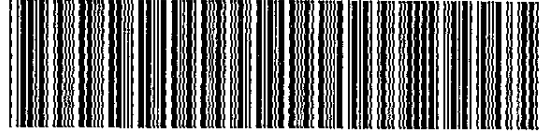
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06 FEB 13 AM 7:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C.F. 2-17

## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Professional Mortgage Processors Of Florida inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: HYLTON BRYAN  
Name (Printed or typed)

304 BISHOP ROAD  
Address

NORTH LAUDERDALE, FL 33068  
City, State & Zip

954-977-7152  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



RECEIVED  
FLORIDA DEPARTMENT OF STATE AM 8:27  
Division of Corporations

February 8, 2006

HYLTON BRYAN  
304 BISHOP RD.  
N. LAUDERDALE, FL 33068

SUBJECT: PROFESSIONAL MORTGAGE PROCESSORS OF FLORIDA INC.  
Ref. Number: W06000006216

We have received your document for PROFESSIONAL MORTGAGE PROCESSORS OF FLORIDA INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Document Specialist  
New Filing Section

Letter Number: 206A00009370

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

24/7 MORTGAGE PROCESSORS, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

304 BISHOP ROAD, N. LAUDERDALE, FL 33068

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MORTGAGE LOAN PROCESSING

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

HYLTON BRYAN, PRESIDENT

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

HYLTON BRYAN  
304 BISHOP ROAD  
N. LAUDERDALE, FL 33068

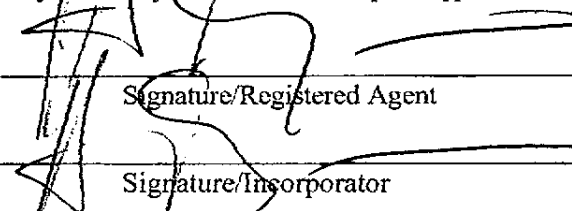
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

HYLTON BRYAN  
304 BISHOP ROAD  
N. LAUDERDALE, FL 33068

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

2/1/06  
Date  
2/1/06  
Date

FILED  
06 FEB 13 AM 7:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA